

53 Ubi Avenue 1 #01-56 Paya Ubi Industrial Park Singapore 408934 Tel: 6747-4454 | Fax: 6747-7752 | Email: claims@unitedsg.com.sg Register No: 201729521C | GST No: 201729521C

(Vic)

BY POST

24th May 2019

Our reference: USG-201807-07 Your reference: SMC3280T /

AXA Insurance Pte Ltd 8 Shenton Way

#24-01 AXA Tower Singapore 068811

Attn: Motor Claims Department

Dear Sir/ Madam,

Claimant

PANG CHOON MOI

Address

BLOCK 55 NEW UPPER CHANGI ROAD #15-1456 SINGAPORE 461055

We are instructed by the above named to claim damages against your insured/your insured's driver in connection with a road accident on 12 JULY 2018 along NEW UPPER CHANGI ROAD TOWARDS BEDOK involving our client's vehicle registration number SKP5064T and vehicle registrations number SMC3280T or driven by you/your insured's driver at the material time.

The accident was caused by your insured negligent driving and/or management of the vehicle. As a result of the accident, our client's vehicle was damaged and our client has been put to loss and expense, particulars of which are as follows:-

Total		\$11, 214.45
LTA Search Fee	1	\$7.45
Loss of Rental		\$5, 750.00
Cost of Repair		\$5, 457.00

A copy of each of the following supporting documents are enclosed:-

- a) Our client's Accident Report/Police Report
- c) Certificate Of Insurance
- e) LTA Search Result & Receipt
- g) Letter Of Authorisation
- i) Rental Invoice

- b) COE/PARF Certificates
- d) Owner / Driver's IC & Driving License
- f) Satisfaction
- h) Invoice

The demand herein is in respect of our client's claim for damages pertaining to their motor vehicle and any settlement following or subsequent of this demand shall not prejudice our client's claim in respect of damages and consequential loss in relation to personal injuries.

Please send to us an acknowledgement of receipt of this letter with 14 days of your receipt of this letter, failing which our client will have no alternative but to commence proceedings against you without further notice to you or your insurer. Our client's claim is quantified based on the supporting documents in our file. Until a settlement is reached, all negotiations are conducted on the basis that the damages quantified herein are subject to revision if so instructed by our client.

Yours faithfully,

United SG Automobile Pte Ltd

#### SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Authorised Driver,
- 3. Information provided must be as truthful and accurate as possible. Any witful misrepresentation or witholding of material facts may allow insurance companies to repudiate policy ability.
- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.

5. Any faise reporting may be referred to the Police for Investigation.

- 6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee, be made available upon application by interested parties.

  7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available.

	ACCIDENT STATEMENT
Date Of Report	13/07/2018 15:41
Date Of Accident	12/07/2018 20:30
Exact Location Of Accident	NEW UPP CHANGI RD TWDS BEDOK
Country/State of Loss	SINGAPORE
L. August and St.	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SKP5064T
Insured/Policyholder	
Name Of Registered Owner	PANG CHOON MOI
NRIC No	S2583401A
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90239611
Alternative Phone No	OFFICE-90239611
Vehicle Particulars	
Manufacturer	BMW
Model	520I AUTO ABS AIRBAG 2WD XENON HEADLAMP
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
f No, Please state action to be taken	THIRD PARTY
/ehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE

Fleet Policy NO

Policy Number 5068093957-03

Cover Note Number

#### Driver

Name of Driver WONG WEI QUAN

NRIC No S9515199Z Date Of Birth 25/04/1995 Occupation INDOOR Date Of Driving Pass 03/01/2017

Driving Experience 1 YEAR AND 6 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-90239611

Fax Number Contact Number

EMail Address NOEMAIL

BLK 55 NEW UPP CHANGI RD #15-1456 Address

461055 Postcode

Was driver an employee of the Insured's Company NO

CHILDREN If No. Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident COLLISION - CHANGE/CROSS LANE

Weather Conditions CLEAR Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident? NO

Number of vehicles involved in the accident

Was any body injured in the Accident? YES

Was any injured conveyed to hospital by NO

ambulance?

Was any other material or property damaged? YES NO

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Passenger 1

NAME:

: NGUYEN THI DUNG

GENDER: : FEMALE

**Details of Police Action** 

Was the accident reported to the police?

NO

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

If Yes, against whom?

NO

YES

NO

Circumstances of Accident

PLEASE REFER TO ATTACHED STATEMENT.

Attachment(s)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

Was there any audio recorded?

NO

**DETAILS OF OTHER VEHICLE PROPERTY 1** 

Vehicle Registration Number

SMC3280T

Vehicle Make/Model/Colour

**Details Of Properties** 

Vehicle Category PRIVATE CAR Name of Driver

VISHAL SAXENA NRIC/Passport Number S7079444F Contact Number 97533802

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

**DETAILS OF INJURED PERSON 1** 

Name

WONG WEI QUAN

Approximate Age

Injuries Sustain

ARM

Injured person in which vehicle?

SKP5064T

Were seat belts worn?

YES

Was this injured conveyed to hospital by

ambulance?

NO

Address Postcode

**DETAILS OF INJURED PERSON 2** 

Name

NGUYEN THI DUNG

Approximate Age

Injuries Sustain

NECK N BACK

Injured person in which vehicle?

SKP5064T

Were seat belts wom?

YES

Was this injured conveyed to hospital by

NO

ambulance?

Address Postcode

#### Accident Sketch Plan

#### SKETCH PLAN

#### IMPORTANT NOTICE

- Plasse report <u>socractily</u> the details of the accident to speed up the claims process.
- 2. This Rows must be completed by the Policyholder and/or the Authorized Drivet
- information provided must be as truthful and accurate as possible. Any willul micropresentation or withholding of material facts may allow insurance companies to regulate policy liability.
- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- 5. Any false reporting may be referred to the Police for investigation.
- 6. The report will be forwarded by the insurers of the GIA Records Management Centra established by the General Insurance Association of Singapore (SIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
- By the ludgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to cupies of the report being made available aforesaid.
- S. Consent under the Personal Data Protection Act (POPA)

l understand, acknowledge, agree and consent that:

- (a) Any insurer, my workshop and the General insurance Association of Singapore ("SIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my incurer confectively the "Personal Information"; and discisse and transfer such Personal information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the insurers' lewyers law firms, the Monetary Authority of Singapore and any newsant government agency/authority (such as the police), for the purpose(s)
  - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary. ivestigations relating to the claims,
  - (II) muscligating the socident and/or my claims;
  - (iii) carrying out and/or dealing with my instructions or responding to any anquetes by me;
  - (iv) administering my claims (including the mailing of correspondence, statements, involves, reports or notices is me. which small levolve disclosure of certain personal data about ms to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
  - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims (calactively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the insurers' lewvers/law firms, may'are permitted to collect, use, disclose and/or process my Personal information for one or more of the above Purposes; and
- (c) my Pensonal information may/can be disclosed by any of the insurers and/or GIA to their third party service providers or agents/including their lewyers/lew firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of freud detection. investigation and management in present and all future claims.
- the information so collected under (d) above may be shared / disclosed;
  - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as ressonably required for the purposes stated, or
  - (ii) For complying with requirements under any regulations, laws or court orders.

Policyholder's Signature Date & Time:

Driver's Signature (If driver is not the policyholder) Cate & Time:

Reporting Cantre Personnel's Signature NECTO NO.:

SCRIBE CIRCUMSTANCES OF THE ACCIDENT    Wen travelling Bhraight along Hew Upper Change   wan travelling Bhraight along Hew Upper Change   wan approachers the traffic light junction   thicle (b) suddenly and in from my right	TCH PLAN	8			A:	JLP 50641		
load towards Bedak H was green en my fano At I was approaching the traffic light junction. Which (b) suddenly cut in from my right		1	1 1	aser Charge	6. 4	MC 2 380	7.	
was travelleny straight along their Upper Changes back towards Bedok H was green en my favo to I was approacheng the traffec light junction. Tetricle (6) suddenly cut en from my right				Thus Um				
As I was approaching the traffic light junction.	1 200	trovel	my B	Watght 1	along	Hew U	oper Chai	y?
refricte (6) suddenly cut in from my right	load d	as as	propele	lok H	con q	nen en	junction	27
and the state of t	lehicle	(6)	Sudd	enty a	d fo	from	my nj	2011

DECLARATION

VWe declare the foregoing particulars are true in every respect.

Policyholder's Signature Date & Time: Ontwer's Signature of driver is not the policyholder) Date & Time: Reporting Centre Personnel's Signature Name: MRC/FM No.:

same to other military

## > Back to OneMotoring

ehicle Owner Particulars	
vner ID Type:	Singapore NRIC
wner ID: ehicle Details	3401A
hicle No.:	SKP5064T
hicle to be Exported:	Yes
ended De-registration Date:	16 Jul 2018
icle Make:	B.M.W.
sicle Model:	520I AUTO ABS AIRBAG 2WD XENON HEADLAMP
mary Colour:	Grey
nufacturing Year:	2009
gine No.:	A839I513N46B20BE
assis No.:	WBANT12050CX30370
ximum Power Output:	115.0 kW (154 bhp)
en Market Value:	\$44,567.00
ginal Registration Date:	11 Dec 2009
st Registration Date:	11 Dec 2009
nsfer Count:	2
tual ARF Paid: rended PARF Rebate Details	\$44,567.00
RF Eligibility:	Yes
RF Eligibility Expiry Date:	10 Dec 2019
RF Rebate Amount: rended COE Rebate Details	\$24,511.00
DE Expiry Date:	10 Dec 2019
E Category:	B - Car (1601cc & above)
E Period(Years):	10
Paid:	\$19,003.00
DE Rebate Amount:	\$2,658.00
tal Rebate Amount:	\$27,169.00

The information contained herein is correct as at 16 Jul 2018



# Certificate of Insurance



MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189) MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960 ROAD TRANSPORT ACT, 1987 (MALAYSIA)

MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number: 5068093957-03

 Index mark and Registration Number of Vehicle Chassis Number

Name of Policyholder

Effective Date of Insurance
 Evening Date of Insurance

Expiry Date of Insurance

5. Persons or Classes of Persons entitled to drive#

(a) The Policyholder.

(b) Any other person who is driving on the Policyholder's order or with his/her permission.
Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

SKP5064T

: 11 Dec 2017

: 10 Dec 2018

Cover : drivo CLASSIC

: WBANT12050CX30370

: PANG CHOON MOI

6 Limitations as to Use#

(a) Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession.

#### This Policy does not cover

- (a) Use for hire or reward.
- (b) Use for racing, pace-making, reliability trial or speed-testing.
- (c) Use for the carriage of goods (other than samples) in connection with any trade or business.
- (d) Use for any purpose in connection with the Motor Trade.

# Limitations rendered inoperative by Section 8 of the Motor Vehicle (Third Party Risks and Compensation)
Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

 EXCESS (SECTION 1)
 : \$5600

 EXCESS (SECTION 2)
 : N/A

 WINDSCREEN EXCESS
 : \$5100

 ADDITIONAL EXCESS
 : N/A

UNNAMED DRIVER EXCESS PLEASE REFER OVERLEAF

REPAIR AT OWNER'S PREFERRED WORKSHOP : NO
INSURE WITH COE : YES
NCD PROTECTION : YES (FREE)
TRANSPORT ALLOWANCE : NO
EXCESS WAIVER : NO

PRIMARY DRIVER : PANG CHOON MOI

NAMED DRIVER (1) : N/A
NAMED DRIVER (2) : N/A

HIRE PURCHASE COMPANY : HUI HUA CREDIT PTE LTD

SUM INSURED : MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

I/We hereby Certify that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

Agency : HUI HUA CREDIT PTE LTD (00000571762)

Date of Issue : 05 Dec 2017 15:19 hrs Reprint : 05 Dec 2017 15:19 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:

**Authorised Officer** 

Chief Executive



REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$9515199Z



WONG WEI QUAN

伟 소

CHINESE 25-04-1995 Courtry of birth SINGAPORE



# YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

EFFECTIVE DATE

Motor cars with unladen weight =< 3000kg with =< 7 passengers, exclusive of driver; and other motor vehicles with unladen weight =< 2500kg 03 Jan 2017

NF 426A

HP Cooping

Lifeeit

Licence No:S#\$15199Z



APT BLK 55 NEW UPPER CHANGI ROAD #15-1456 SINGAPORE 461055





Land Transport Authority 10 Sin Ming Drive Singapore 575701

GST Registration No.: M4-0006529-2

Print Date/Time:

16 Jul 2018 / 10:11:52

Receipt Date/Time:

16 Jul 2018 / 10:11:51

Tax Invoice/Receipt

Receipt No.: ITNET-00000-180716-000480

Previous Receipt No. :

S/N Item Description/ Business Transaction Reference No.		Amount Before GST (SS)	GST Amount (S\$)	Amount After GST (SS)
Result of Insurance Enquiry - SMC3280T As at 12 Jul 2018/20:30:00 Insurance Co: AXA INSURANCE PTE LTD 1 Insurance Enquiry - SMC3280T Enquiry Fee 20180716101123761108		7.00	0.49	7.49
	Sub-Total	7.00	0.49	7,49
	Total Before Rounding	7.00	0.49	7.49
	Rounding Difference			0.04
	Total Amount Payable			7.45
	Paid By			
	300000000000000000000000000000000000000	Credit Card /MasterC		7.45
	Total			7.45
	Cash Change			0.00
	Tendered Amount			7.45
	Excess Refundable Amount			0.00

#### THANK YOU AND HAVE A NICE DAY!

Please ensure that all payments to the Authority are good and promptly settled by the payment service provider / financial institution. Otherwise, the transaction and receipt is considered void and late fee may apply.

# MOTOR CLAIM DISCHARGE

INSURED: PANG CHOON MOI	CAR/LORRY/CYCLE:REG.NO:SKP5064T
ACCIDENT:CLAIM NO:	POLICY NO:
I / We confirm that I/we have	taken delivery of Car / <del>Lorry / Motor Cycle</del>
Registered No SKP5064T	from the repairers,
Messrs UNITED SG AUTOMOBILE PT	TE LTD
and that all repairs necessary as a re	sult of an accident in which the said vehicle was
involved on or about12 (DD).	JULY (MM)(YY) have been
completed to my / our satisfaction; ar	nd that I / we have no further claims on the above
Company in respect thereof.	
42 88 2004	Pay.
DATE / TIME 13 JULY 2018 SI	GNATURE OF INSURED.

Date 24 MAY 2019 Attn: Motor Claims Dept AXA INSURANCE PTE LTD 8 SHENTON WAY #24-01 AXA TOWER SINGAPORE 068811 Dear Sir/Mdm 12 JULY 2018 ACCIDENT ON INVOLVING VEHICLE NOS: SKP5064T / SMC3280T ALONG NEW UPPER CHANGI ROAD TOWARDS BEDOK I/We the registered owner/driver of vehicle regn. no. SKP5064T which was involved in the above accident with motor vehicle regn no. SMC3280T insured by you. I/We also hereby authorise that any payment due to me/us from the aforesaid claim be paid to M/s UNITED SG AUTOMOBILE PTE LTD. I/We hereby indemnify M/s United SG Automobile Pte Ltd against all claims and/or damages which may arise from all action taken for and on my/our behalf. I/We hereby affirmed that above-mentioned statement to be true and correct. Yours faithfully Owner Signature (Company's stamp if applicable) Name in Full: PANG CHOON MOI NRIC No S2583401A Address BLOCK 55 NEW UPPER CHANGI ROAD #15-1456 SINGAPORE 461055

# United sg Automobile Pte Ltd

"We are always in your journey"...

53 Ubi Avenue 1 #01-56 Paya Ubi Industrial Park Singapore 408934 Tel: 6747-4454 | Fax: 6747-7752 | Email: claims@unitedsg.com.sg

UEN No: 201729521C | GST No: 201729521C

# TAX INVOICE

UI-1135 **AXA INSURANCE PTE LTD** Invoice number 24-May-19 8 SHENTON WAY Date SKP5064T Vehicle numner #24-01 AXA TOWER SINGAPORE 068811 Make Model BMW 5201 ATTN: MOTOR CLAIMS DEPARTMENT Accident date 12-Jul-18 USG-201807-07 Reference number

Description		Amount SGD\$
Inclusive of supplying parts, labour, panel beating and spray		
painting		
Lump Sum Repair		5100.00
GST @ 7%		357.00
	Total	5457.00

Singdollars: Five Thousand Four Hundred and Fifty Seven





Zoom Car Leasing

Registration No.: 5339410M e-mail: zoomcarleasing@gmail.com

RENTAL INVOICE

United SG Automobile Pte Ltd

53 Ubi Avenue 1, #01-56 Paya Ubi Industrial Park

Singapore 408934 Tel: 6747 4454 Invoice No.

9/8/2018

Date Ref

SKX 3923 R

Your Ref

SKP 5064 T

Terms

30Days

			UM	16-201807-07	
ij.	Rental Period	Rate	Quantity	Amount	
1	Rental Charges for SKX 3823 R	\$250.00	23 Days	\$5,750.00	
	(12/07/2018 to 04/08/2018)				

C/O Wong Wei Quan

55 New Upper Changi Road

#15-1456 Singapore 461055

Contact: 9023 9611

Total

\$5,750.00

(Customer's Signature/Stamp)

(For Zoom Car Leasing)



### Zoom Car Leasing

Registration No.: 53349410M E-mail: zoomcarleasing@gmail.com

# RENTAL AGREEMENT

SKP 5064 T

		2/	2004	
HIRER'S PARTICULAR		VEHICLE DETAIL		
Name: PANG CHOON	Mol	Vehicle No.: Skx 3823 R		
NRIC/Passport No.: §	2583401A	Vehicle Make/Model: M/W		
Address:		Date/Time Out: 12/07/2019		
		Date/Time In: 04   08   301f		
		31,00		
Tel:		E (%) 1/4 F (E) 1/4	15 14 F	
Driving License No./Ex	ф.:	OUT	IN -	
ADDITIONAL DRIVER	S PARTICULAR	Mileage: Mileage:		
Name: WONG WEI	CANIE	RENTAL CHARGES		
NRIC/Passport No.: 5		Hours @ per hour		
Address: 55 New	hop changi road	13 Days @ \$150 per day	\$5750	
#15	456 5(461055)	Weeks @ per weel		
0.9	196 2(401044)			
Tel: 4025 4611		Months @ per mon Other Charges	tn	
Driving License No./Ex	n :	Petrol Top-Up		
	nt (D) - Dent (S) - Scratch	Sub-total		
(M) Medide	in (b) - bein (s) - scratch	TOTAL CHARGES	Aram	
FOI		PRE-PAYMENT	45750	
		Downpayment and Deposit		
TIV	NP	Amount Refunded Due	-	
		I/We agreed to the terms and conditions abo and that all information given are true & con respect. My/Our driving license(s) is/are curr not disqualified from driving.	rect in all	
PHYSICAL DAMAGE EX	CESS ACKNOWLEDGEMENT			
ingapore - Own Damage	5\$2,000.00			
ingapore - 3rd Party	5\$2,000.00			
Valaysia*	\$\$8,000.00			
or Drivers aged < 27 or > 65 and/or less than	553 000 00	LV:		
years driving experience	\$53,000.00 (Additional)	1		
egardless of age		Woods Clause A Park		
MPORT NOTE:		Hirer's Signature / Date		
ORE THAN 2 YEARS, AUTHORISED, 6 16 VEHICLE Wehicle is strictly for use in Singapo is prior written consent of Zoom Cal Use of wehicle for illegal purposes is afficking, smuggling) is strictly prohi	e.g. in connection with theft, drug pedalling or bited.	ZOOM CAR		
in case of accident, the inner shall re	eport to Zoom Car Leasing immediately.	Owner's Signature / Date		